



# South East Regional Trauma Coordinating Committee

## Conference Call Notes

November 3, 2008

09:00 – 11:00

**Attendees:** Raul Coimbra, MD  
A. Brent Eastman, MD  
Les Gardina, RN  
Dot Kelley, RN and USC Nursing Student  
Virginia Hastings  
Cynthia Marlin-Stoll, RN  
Sharon Pacyna

**EMSA Staff:** Johnathan Jones

**Guest:** David Shatz, MD

**Agenda Item:** Introductions

**Agenda Item:** Approval of October 6<sup>th</sup>, 2008 Minutes

Bonnie had posed a written question asking for clarification of who would be responsible for the development of MOU's addressing roles and responsibilities of LEMSAs and establishment of a QA for System Improvement.

The group discussed having the Repatriation and QI Subcommittees initiate steps concentrating on medical aspects of care. However the establishment of MOU's is a broader issue and requires administrative input.

**Agenda Item:** Subgroup Activities

**Trauma Triage** – LEAD: Cynthia Marlin-Stoli

Cindi is in the process of collecting current triage criteria. The group discussed distinctions of County Triage Protocols, internal hospital triage and hospital activation policies. Registry data was discussed and it was clarified that each County had standardized trauma registry data fields.

Dr. Shatz offered that there is a Florida State Office of Trauma which is responsible for the trauma registry and minimum registry criteria is established by law for the entire state of Florida. Each County or Trauma Center is allowed to expand on the minimum data set.

Dr. Coimbra clarified that the original intent of our committee was to collect Triage Criteria from each of our counties. We are taking it one step further to look at each hospital's internal guidelines for activation and what is included in individual registries and submit this to the state.

Dr. Shatz offered to forward the Florida State data, and Cindi stated she had the Miami Dade Miami Dade Uniform Trauma Transport Protocols.

**Action Items:** *Cindi will forward the Miami Dade document to the Steering Committee.*

*Les will forward San Diego's Triage Criteria and Cindi will contact Ryan for Imperial County criteria.*

*Cindi will distribute a graph collating each County's triage criteria prior to the next Conference Call.*

**Quality Improvement** – LEAD: Sharon Pacyna/Dorothy Kelley

Sharon reported the QI Subcommittee is scheduled to have their first Conference Call on Wednesday, 11-05-08. Dot explained we will be discussing quality indicators and will concentrate on system issues.

**Funding** – LEAD: Virginia Hastings

Virginia reported they have had one conference call and

EMS Agency Administrators were all on the call. They are scheduled for another call this Friday, 11-07-08.

Discussions have centered on projecting the volume of patients crossing county lines and Les volunteered information from the Repatriation Subcommittee. Fiscal personnel are investigating what types of funding might be available for uncompensated care. For example the Maddy Funds, which have historically been for uncompensated care, are not always under LEMSA management. Once estimations of patient volume and funding are determined County policies will be explored and the group will look at the possibility of moving money across county lines. Repatriation will be a big part of their efforts.

**Repatriation – LEAD: Les Gardina and Ryan Kelley**

The subcommittee is in the data collection phase. Les has received information on the number of transfers from Imperial County to San Diego County Trauma Centers.

Heidi at Desert Community Hospital will provide information on their transfers. Ryan will provide information from Imperial County.

Next steps include identifying resource capabilities in Imperial County but will probably need to talk to physicians or administrators at each of the two Hospitals.

Committee goals include trying to define patient clinical needs and gaps in available resources.

**Agenda Item: ICEMA – Provide Quality Indicators used in the Regional QI Process**

**Agenda Item: Continuation of Care Policies**

Continuation of Care Policies were discussed and Dr. Shatz explained the Florida process and that all participants abide by the guidelines. Cindi stated the Interfacility Guidelines are in the Miami Dade Uniform Trauma Transport Protocols but is missing one of the Appendices (the step-by-step process is missing).

It was questioned whether Florida had a statewide QI process. Dr. Shatz responded there was no statewide process and that quality indicators/definitions were developed on a hospital-to-hospital basis.

**Agenda Item: Regional Summit – Report from Program Committee**

Cindi has forwarded Temecula's bid to Bonnie and is compiling two additional bids because the State requires three bids to move it through the budget.

Temecula Creek Inn submitted a new bid with a commitment for 10 rooms. The members were polled and it was determined we already have 8 commitments to stay overnight so this should be achievable.

Jonathan reported that Chief Ernst or colleague will present. Chief Ernst is currently on shift but is trying to rearrange his calendar.

Cindi reported the Conference Room can accommodate 100 participants.

Key stake holders:

EMSA and LEMSAs administrators  
Trauma Directors  
Trauma Program Managers  
Trauma Center Administrators  
Trauma Finance personnel  
Fire representatives  
Pre-hospital Provider representatives  
Hospital Association members

It was suggested that each subcommittee identify stake holders critical to their efforts. Johnathan mentioned that two other RTCC's independently arrived at the same conclusion that the best strategy to encourage participation would be to have the LEMSAs personally invite the stake holders.

Meeting objectives:

- 1) Presentations should summarize the work that has been done
- 2) Pose questions and address future challenges.

It was questioned whether we should offer continuing education credit. Johnathan replied that in order for the State to offer CEUs, strict objectives must be met. It was decided we would explore this option for future meetings.

Breakout Sessions can be organized by subcommittee.

Dr. Eastman stated we are laying the groundwork for a statewide system and each committee can include data in their discussions.

It was decided that Aeromedical issues should not be topic at this time but for future discussions.

Funding and Repatriation will be combined because funding will not be successful without a repatriation arm.

Discussion whether individuals should be assigned to a Breakout session vs. choose a Breakout session. Breakout rooms have limited capacity and we want to ensure a diverse audience in each session. Final thoughts were to have each LEMSA assign certain constituents to each session, leaving some seats available in each session. Unassigned participants can sign-up the morning of the meeting on an availability basis.

We will provide our own lap tops for the morning presentations.

Need easels for breakout sessions. Cindi mentioned Kathi Ayers had huge "post-its" at last year's TMAC meeting that were helpful.

Need scribes for each session.

**Action Item:** *LEMSAs and Trauma Centers should develop a list of volunteers who can help with registration and scribes.*

**Action Item:** *Each LEMSA will develop a list of names and send out invitations from LEMSAs on behalf of our RTCC. Invitee lists should be drafted by this Friday, 11-07-08.*

**Agenda Item:** **Proposed Agenda for January's face to face meeting**

Dr. Coimbra's draft Agenda was reviewed with positive feedback. Minor revisions were discussed and Dr. Coimbra

will incorporate these suggestions.

Johnathan stated Dr. Tharratt could do Opening Remarks.

**Action Item:** *Dr. Coimbra will revise the Agenda and distribute with an invitation Cover Letter.*

**Agenda Item: State Advisory Board Membership**

Each RTCC will have a member on the State Advisory Board. Dr. Eastman nominated Dr. Coimbra, the group agreed and Dr. Coimbra accepted.

**Agenda Item: Conference Call Day/Time**

Several members stated Monday mornings were extremely busy and asked the committee if an alternate day/time could be chosen.

The group decided on Monday afternoons at 13:00 **starting in January (the December call will remain as scheduled)**.

January Steering Committee Conference Calls:

- **January 5, 2009 13:00 – 15:00**
- **January 12, 2009 13:00 – 15:00**

**Action Item:** *Bonnie will set up January conference calls*

Dr. Coimbra thanked Dr. Shatz for his input.

Next Conference Call is **December 1, 2008 9 AM – 11 AM.**

Meeting Adjourned.